

# Montana Laboratory Sentinel



Updates from the MT Laboratory Services Bureau  
800-821-7284 <http://healthlab.hhs.mt.gov/>

6/30/2010



## Carbapenem - Resistant Enteric Isolates

**Round up these isolates & send to MTPHL**

The June 25<sup>th</sup> MMWR reports that the Centers for Disease Control and Prevention (CDC) has identified three carbapenemase-producing *Enterobacteriaceae* that are resistant via the NDM-1 metallo-beta-lactamase (NDM MBL) rather than KPC. All three recently had medical care in India where this resistant mechanism is common.

If any clinical laboratories in Montana have identified carbapenem-resistant enteric isolates from people who have had recent exposure to medical care in India or Pakistan, please submit these isolates to the Montana Public Health Laboratory. MTPHL will perform initial testing for carbapenemases, and refer screen positive isolates to CDC for additional testing. The full MMWR article can be accessed at:

[http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5924a5.htm?s\\_cid=mm5924a5\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5924a5.htm?s_cid=mm5924a5_e)



<http://www.clsi.org/>

## New CLSI AST Document

M100-S20 June 2010 Update  
Performance Standards for Antimicrobial  
Susceptibility Testing; Update (M100-S20-U)

- New interpretive criteria for doripenem
- Revised interpretive criteria for ertapenem, imipenem, and meropenem for *Enterobacteriaceae*
- Guidance for use of the modified Hodge test (MHT) with revised interpretive criteria for carbapenems

*CLSI fee is \$25 for the update M100-S20-U. Unfortunately, MT PHL does not have the funding available to purchase the update for clinical laboratories.*

## Please visit our website!

The DPHHS Laboratory has updated the website! New postings include:

- New water test request forms
- 2010-2011 clinical Laboratory Services Manual
- Fee List effective on July 1, 2010
- Story about our recent open house along with a great new staff photo

Here is a link to the website: <http://lab.hhs.mt.gov>

Please [contact us](#) if you have suggestions for items you'd like to see on our website.

## MT Laboratory Services Bureau Preparedness Staff

Mary Simmons..... Lab Preparedness  
Supervisor..... 444-9777

Kathy Martinka..... Biological Terrorism  
Coordinator..... 444-0944

Joel Felix..... Chemical Terrorism  
Coordinator..... 444-4115

## Bioterrorism Preparedness Training for LRN Sentinel Laboratories

Registration is open for the **BT Wet Workshop - July 30, 2010 - Helena MT.**

A one-day presentation and laboratory observation of *Bacillus anthracis*, *Brucella spp.*, *Yersinia pestis*, *Francisella tularensis*, *Burkholderia spp.* and other agents. Laboratory Response Network protocols, Biosafety and other Emergency Preparedness issues will be discussed.



Please register at [www.nltn.org/127-10.htm](http://www.nltn.org/127-10.htm)  
This workshop is presented in cooperation with the National Laboratory Training Network. No charge to Montana residents.

Limit: 20 microbiologists Questions: E-mail  
Kathy Martinka [kmartinka@mt.gov](mailto:kmartinka@mt.gov)



## MT Communicable Disease Update Weeks 23 & 24 - Ending 06/12/10 & 06/19/10

This newsletter is produced by the Montana Communicable Disease Epidemiology Program.

Questions regarding its content should be directed to 406.444.0273 (24/7/365).

<http://cdepi.hhs.mt.gov>

**DISEASE INFORMATION: Summary – Week 23 & 24 - Ending 6/12/10 & 6/19/10** – Disease reports received at DPHHS during the reporting period June 6-19, 2010 included the following:

- Vaccine Preventable Diseases: Pertussis (11), invasive *Streptococcus pneumoniae* (1), Varicella (17)
- Enteric Diseases: Campylobacteriosis (9), Cryptosporidiosis (1), *E. coli* 0157 (1), Salmonellosis (6)
- Other Conditions: Legionellosis (1), Rocky Mountain Spotted Fever (3), Tularemia (1)
- Travel Related Conditions: None

**NEW! Rocky Mountain Spotted Fever Increase** - Between June 13 and 17 there have been four reports of Rocky Mountain spotted fever (RMSF) illness, three in MT residents and one in a traveler. RMSF is an acute tick-borne illness caused by the bacterium *Rickettsia rickettsii*. People who become ill with RMSF do not always recall being bitten by a tick. Symptoms associated with RMSF include fever, headache, fatigue, muscle aches, vomiting, nausea, and loss of appetite. A rash may appear 3 – 5 days after fever onset and is present in up to 90% of pediatric cases, and up to 60% of adult cases. Infection with *R. rickettsia* can cause severe illness and appropriate antibiotic treatment should be initiated IMMEDIATELY when RMSF is suspected on the basis of clinical and epidemiologic findings. A recent HAN outlined recommendations for clinicians if they suspect RMSF:

- Send an acute serum sample to a reference laboratory or to the Montana Department of Public Health Laboratory for a tick-borne disease serology panel
- Follow-up with a convalescent serum sample 2 – 4 weeks post – illness onset to confirm a four – fold rise in IgG antibody titer
- Do not delay treatment while awaiting lab test results. Doxycycline is the drug of choice for treatment in children and adults. <http://www.cdc.gov/ticks/treatment.html>
- Collect exposure history from patient including a geographic location where a tick bite may have occurred
- Report all suspected and confirmed cases of RMSF to your local health department

More information about RMSF is available on the web at:

[http://www.cdc.gov/ticks/diseases/rocky\\_mountain\\_spotted\\_fever/index.html](http://www.cdc.gov/ticks/diseases/rocky_mountain_spotted_fever/index.html)

[http://www.dphhs.mt.gov/PHSD/epidemiology/documents/SS\\_RMSF\\_May2010.pdf](http://www.dphhs.mt.gov/PHSD/epidemiology/documents/SS_RMSF_May2010.pdf)

**Surveillance Snapshot on Rocky Mountain Spotted Fever**

<http://www.dphhs.mt.gov/PHSD/epidemiology/SurveillanceSnapshots.shtml>

**Pertussis** – There have been 25 reported cases of pertussis in 2010 to date, 18 occurring since mid-May. Please remind providers to “think pertussis” and do PCR testing for this condition in patients. Most recent cases have occurred in Gallatin, Lewis & Clark, Rosebud (cluster) and Yellowstone counties. *In addition, please take every opportunity to vaccinate for pertussis – both children and adults!*

**Rabies** – Two cases of animal rabies have been detected during the last few weeks – a horse in Yellowstone County and a bat in Treasure County. Yellowstone County is now under quarantine effective June 3 for 60 days. (<http://liv.mt.gov/liv/news/2010/20100608.asp>)

**Bats and Summer Camps in Montana** – This resource assists camp directors and local health departments with bat exclusion and control in summer camp situations <http://www.dphhs.mt.gov/PHSD/epidemiology/cdepi-rabies.shtml>

**CDEpidemiology Staff** – Please contact the following content experts for consultation regarding specific communicable diseases or the general number 24/7/365 406.444.0273.

Enteric, vectorborne, zoonotic diseases	Jennifer Lowell	406.444.4735
Vaccine-preventable diseases, rabies, hepatitis A	Elton Mosher	406.444.3165
Tuberculosis	Denise Ingman	406.444.0275

**NEW! The ABCs of Hepatitis** – This helpful fact sheet from the CDC for professionals has been updated.

<http://www.cdc.gov/hepatitis/Resources/Professionals/PDFs/ABCTable.pdf> (color)

[http://www.cdc.gov/hepatitis/Resources/Professionals/PDFs/ABCTable\\_BW.pdf](http://www.cdc.gov/hepatitis/Resources/Professionals/PDFs/ABCTable_BW.pdf) (black & white)

**NEW! One Needle, One Syringe, Only One Time** – This campaign led by CDC and the Safe Injection Practices Coalition (SIPC) is intended to raise awareness among patients and healthcare providers about safe injection practices and to eradicate outbreaks resulting from unsafe practices. Since 1999, more than 125,000 patients in the United States have been notified of potential exposure to hepatitis B virus, hepatitis C virus, and HIV due to lapses in basic infection control practices. For more info, visit: <http://www.oneandonlycampaign.org>.

**Hepatitis C Education** – Two FREE one day trainings on hepatitis C will be offered in Billings (July 27th) and Helena (July 29th) by the Hepatitis C Support Project. Registration information is attached.